



# Branson Goers Gazette

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## **"Getting To Know You"** *featuring Roma and John Wing*



**Question:** *What is your name and at what age did you contract polio?*

John Wing. I contracted polio when I was 5 years old (August of 1937).

**Question:** *How did you having polio affect the way you were treated?*

As to how polio has affected the way I was treated by others - On the whole, I would have to say I have been treated very well by others in regards to my polio affliction. This has held true for my early as well as my older years. I do recall early on that older folks generally voiced more open regrets about my physical loss. Other than that, nothing of lasting concern comes to mind.

Throughout my early years, I cannot really say I was conscious that I was being treated much differently from any one else. I understood my limitations. Believe me, I have tried everything at one time or other and have lasting scars to prove it - so I well knew just where I stood (and where I couldn't). And yes, there were times that I was excluded from certain activities that obviously required the physical ability that I lacked.

However, most of the time, if I could not participate directly, I was given a supporting role so that I wasn't, or didn't feel, left out. On those few occasions that any feeling of injustice occurred, my parents generally stepped in and leveled the field. At that age you have to realize "I could be bought".

In later years, I became aware that my parents were really the ones to have suffered the most from the stigmatic effects of being associated with the polio virus. Due to the unknowns, the fear and horror of contamination, they were isolated for a long period of time. As a result, their entire lives were upset. I learned in later years that they lost some close friends and many associations that they were previously involved with. I can only praise them for their continued support for me.

I have fond remembrances of schooling years. Early on, I found a wonderful gal that didn't seem to care about my odd and unique ways of doing things and getting about. We have three nice kids and four grandchildren who have never mention or indicated that I was any different from others. I have learned since then that the grandchildren did have a lot of questions which they asked their parents. I also never had a problem finding a job. In fact, I always felt the handicap was a plus in that effort. I have had many blessings on all levels.

***Question: How did you having Polio affect your self-esteem?***

As for what polio has done to or for my self esteem - Truthfully, I feel that my self-esteem seems well intact. Having early on accepted my physical limitations, I have also been successful at finding satisfying and workable paths around most of the important problems. I feel I have enjoyed a very normal and satisfying life. I have been able to do just about anything I had a real urge to do and would be content to do it again.

***Question: Are you married, and if so, how did you meet your mate?***

Roma and I have been married for fifty-four years come February. We met in high school but did not start dating till the summer after we graduated. We both ended up working in different restaurants that were side by side on what was then a very busy state highway. I was a night cashier in an all night diner and Roma was a waitress in a "high class" restaurant (Howard Johnson's). We began meeting together on our breaks. We dated during our college years and were married just before her graduation.

***Question: When did PPS enter your life?***

PPS did not entire my life until around age 62. I had broken my left femur and was bedridden for over 10 weeks; then immediately had to have some follow up surgery, which again set me back another month before getting back into action. I lost a lot of strength in this interim. At this time we were living in Massachusetts in a two-story house where all the bedrooms were on the second floor. This was not working out well at all for me. Shortly after we both retired, we moved south where we found a new home that was on one level and wheelchair accessible. After a very rapid loss of strength, it was also found that in addition to the PPS that I had some pinched nerve problems in my neck that were causing some problems. This has now been corrected and some of the strength is slowly returning.

## *Comments to or from your spouse / supporter?*

It has been a wonderful journey. I knew at fifteen that I would someday marry John. He was a slow learner and it took another two years for him to notice me enough to ask me out (to the "Passion Pit")! When I said "I do", I didn't know it meant camping all over New England in icy cold conditions, being first mate on an ocean going vessel and then on the Tennessee River, acting as carpenter's apprentice while he built our house, auto mechanic when he serviced the cars — ad infinitum. My idea of activity was the turning of the pages in whatever book I was reading. Big awakening!

We've loved the activities with the kids and the grandkids. Now we look forward to September and good times with our first great-grandchild. (There seems to be something in the water at Ft. Campbell!!) I'm in agreement -- we have been blessed.

## ***T'N'T: Tips and Techniques for Polio Survivors***

*by Dr. Richard L. Bruno*

*(This column is for information purposes only and is not intended as a substitute for professional medical advice.)*

Drug companies are now reporting that statins can cause muscle pain anywhere in the body without causing muscle breakdown.

*I have been taking a statin drug to lower my cholesterol for several years. I recently started to have muscle pain in both arms and went to my doctor. He did blood tests and said the statin wasn't causing the pain. But, he stopped the drug and, after a few days, the pain went away. Was the statin causing the pain or was it a coincidence?*

Problems with cholesterol lowering drugs in polio survivors redux... again!

I've written two columns about cholesterol-lowering drugs potentially causing unique problems in polio survivors. The first column was published five years ago. The buzz in the post-polio community then was that rhabdomyolysis -- a very serious condition where kidney and muscle tissues breakdown -- occurred more frequently in polio survivors who take statins, the then newest cholesterol-lowering drugs. There have been no specific studies of cholesterol-lowering drugs in polio survivors, but there seemed to be no reason polio survivors would be more prone to rhabdomyolysis. Only about one-half of one percent of anyone who takes a statin, such as Lipitor, develops rhabdomyolysis, which can indeed cause muscle pain (usually in the calves), muscle weakness and possibly even kidney failure. With rhabdomyolysis, the enzyme creatine phosphokinase (CK, also called CPK) is released as muscle breaks down, CK sometimes increasing to more than ten times the normal limit.

You should be aware that polio survivors can have an elevated CK without taking a statin. Two studies have found that 40% of polio survivors had abnormally elevated CK, with men having significantly higher CK than did women. In one study, CK increased with the number of steps polio survivors walked in a day.

In 50 Post-Polio Institute patients who were not taking statins, 21% had an abnormally elevated CK of about 225, which is one-third higher than normal, but not ten times higher. Still, an elevated CK may mean that polio survivors are making their muscles work too hard and causing the fibers to break down, but isn't evidence of rhabdomyolysis.

Regardless, your CK was normal and you had arm muscle pain -- not calf pain -- that went away when you stopped the statin. Drug companies are now reporting that statins can cause muscle pain anywhere in the body, not just in the calves, without causing muscle breakdown or elevating CK. An exception is Zocor, which, although it can cause rhabdomyolysis, is reported by its manufacturer to cause muscle pain no more frequently than in those taking placebo.

Newer cholesterol-lowering drugs, the fibrates (Tricor and Lopid), also can cause rhabdomyolysis, elevated CK and "diffuse muscle pain, tenderness and weakness." Even one of the oldest cholesterol-lowering drugs, the bile-acid sequestrant Welcol, is reported to cause muscle pain in 2% of patients versus none of those on placebo. What's more, the cholesterol lowering B vitamin, Niacin, has also been reported to cause "pain," although no more frequently than in those taking a placebo. The good news is that the newest cholesterol-lowering drug, Zetia, is said to produce "no excess" rhabdomyolysis or increase in CK, and produced only slightly more (.04%) muscle pain than did placebo.

Whatever drug you chose with your doctor, remember that rhabdomyolysis and muscle pain are more likely if you're taking a combination of cholesterol-lowering drugs, calcium channel blockers, immune system inhibitors, certain antibiotics or antifungal drugs, have kidney disease, diabetes, a slow thyroid or drink more than a quart of grapefruit juice a day. If you're taking a cholesterol-lowering drug and feel muscle pain, even if you've been on the medication for a while, stop the drug immediately and call your doctor.

Also, remember that there is more to managing cholesterol than taking a pill. Reducing saturated fat and eating foods high in soluble fiber -- such as cereal grains, beans, peas, legumes, fruits and vegetables -- can help lower triglycerides and the "bad" low-density cholesterol (LDL) while raising the "good" high-density (HDL) cholesterol. It is also recommended that you lose weight, decrease stress, treat high blood pressure, stop smoking and have a five-ounce glass of wine with dinner. By following these suggestions and The Post-Polio Institute "Diet" (that recommends eating more protein, especially at breakfast) and reducing carbs and portion size -- you can lose weight, fuel your neurons to feel less fatigue and muscle weakness, while keeping your plumbing clear of cholesterol.

*Dr. Richard Bruno is Chairperson of the International Post-Polio Task Force and Director of The Post-Polio Institute and International Centre for Post-Polio Education and Research at Englewood (NJ) Hospital and Medical Center. His new e-Book, How to STOP Being Vampire Bait: Your Personal Stress Annihilation Program, is now available through [PostPolioInfo@aol.com](mailto:PostPolioInfo@aol.com).*

## **New PPS Group Formed**

The new Mid-America Post-Polio Support Group has been formed by Barbara Adair due to the lack of support groups in the local Sedalia, MO area. The group is still small with hopes of growing. The nearest meetings before were in Shawnee Mission, KS and St. Louis, MO. Sedalia is centrally located between Jefferson City, MO and Overland Park, KS.

## **Puffs From the Frozen North**

*by Millie Lill, Editor*

*(First of all, let me apologize for the lack of jokes and funny pictures in this issue. The formatting may be slightly different as well. I am visiting my mother in law in Strathmore, Alberta and didn't bring along all the files I need to do the newsletter.)*

Here is your homework for February: Invent a healthy diet that is cheap, easy to find and can be popped into the microwave or eaten cold. Come on now, that shouldn't be hard.

Why should you do that? Good question. You should do that because your editor and her husband need to re-evaluate their diets and are too lazy to actually cook. OK, Jaan is not too lazy, he actually loves to cook,

it's me. I admit it. I will happily cook for a houseful of people, but I don't like to cook for myself alone. I hate to eat alone, too. Jaan's problem is that cooking while driving a truck can be a problem.

We left Hvas on Monday, January 22, with Jaan feeling exhausted and not quite well. By the time we arrived in Strathmore that evening, he was in a great deal of pain. Being a Man, he could not, naturally, just go to a doctor. That would violate the Rules of Manhood. He dropped me off at his mother's house and went on to Calgary to unload his trailer.

By the next morning, he decided to go to the ER. Good choice. He had an abscess in, shall we say, a Very Delicate Spot. It had ruptured on its own, but he needed twice-a-day antibiotics by IV. While checking him out, the doctor also found that his blood sugars were elevated. This does not necessarily mean he is diabetic, but it is an indication that he might become so. His mother has Type II diabetes, so we are listening to the warning.

That's where the diet comes in. Jaan's sister Enna is an RN Practitioner and is very knowledgeable about diet and nutrition. She has recommended the GI diet. No, don't worry; our soldiers are in no danger of being consumed by the Lills. The GI diet is the one where you avoid Bad Carbs and eat Good Carbs, like whole grains and such. In other words, Jaan has to be careful at the truck stop buffets and I can no longer live on bagels and Nutella.

Those of you who know me may be wondering if there it is mere coincidence that my first husband developed diabetes and now my second husband is following suit.

I have asked around and apparently I am NOT just too sweet. What a relief.